PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE rEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for nov change of address)

FILING DATE

03/24/2004

SMALL ENTITY

YES

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer

YEDA RESEARCH AND DEVELOPMENT CO.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

TITLE OF INVENTION: POLY-GLU. TYR FOR NEUROPROTECTIVE THERAPY

ISSUE FEE DUE

\$720

ART UNIT

1649

7590

WASHINGTON, DC 20001-5303

EXAMINER

KOLKER DANIEL E

Address form PTO/SB/122) attached.

APPLICATION NO.

10/807 414

APPIN TYPE

nonprovisional

Number is required.

(A) NAME OF ASSIGNEE

BROWDY AND NEIMARK, P.L.L.C. 624 NINTH STREET, NW SUITE 300

03/10/2008

RISTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as minicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications

FIRST NAMED INVENTOR

Michal Eisenbach-Schwartz

PUBLICATION FEE DUE

\$300

CLASS-SUBCLASS

514-012000

or agents OR, alternatively,

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

T.TD

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attornevs

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

4a. The following fec(s) are submitted: Issue Fee Poblication Fee (No small entity discount permitted) Advance Order - # of Copies	4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) ☐ ∆ check is enclosed. ☐ Payment by credit card. Form-PTO-2038—is attached. ☐ The Director is bereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Depoid 1 Account Number ☐ 724 € 55. (circlose an extra copy of this form).
5. Change in Entity Status (from status indicated above) \$\sum_{\text{a}}\$ a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27.	☐ b. Applicant is no longer elaiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.	
Authorized Signature for Typed or printed name hoger k. Bro	Date JUNE 10 7008 Registration No. 255, 618
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 58 USC 1.22 and 37 CFR 1.41. this collection is estimated to take 12 minutes to complete, enabling gatheric, predamin, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, aboud be sent to the Chris Information Officer. U.S. Paternated V.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 2231-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-1450.	
Under the Paperwork Reduction Act of 1995, no persons are required to r	respond to a collection of information unless it displays a valid OMB control number.

REHOVOT, ISRAEL

Note: A certificate of mailing can only be used for domestic mailings of the Fce(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Feed's Transmutal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (5/11) 273-2885, on the date indicated below.

ATTORNEY DOCKET NO

EIS-SCHWARTZ2LA

TOTAL FEETS DUE

\$1020

PREV. PAID ISSUE FEE

SO

(Depositor's name) (Signature (Date)

CONFIRMATION NO

2066

DATE DUE

06/10/2008

Browdy and Neimark